

Independent Care Matters

the newsletter for independent care providers in York
and North Yorkshire

Safeguarding Adults— investigations a grey area?

Abuse of any kind is abhorrent across all walks of life and must be eradicated. We all share a duty in making this a reality and it follows that any alleged abuse of vulnerable people is to be taken very seriously and looked into immediately.

ICG does, however, have concerns about the way that some Safeguarding Adults investigations, where local authorities take the lead, are initiated and undertaken. A formal Safeguarding Adults investigation is a very serious matter and should be carried out only after careful consideration into what is appropriate – that is not to say that **all** complaints should not be dealt with properly.

Social care providers have never been more highly regulated and it **cannot** be disputed that higher standards of care are in everyone's best interests. In context, this is at a time when Government proposals suggest that in future social care could be provided by an unregulated workforce (see page 2). Currently the Commission for Social Care Inspection (CSCI) regulates, inspects and reviews all adult social care services.

Being able to understand what is expected of a care provider particularly in regulatory terms is fundamental to the operation and there has been a long running debate around consistency and how regulations are interpreted in different regions by CSCI across the country. This has been raised at local and national level, but of late, there seems to be a new grey area around the local authorities role in Safeguarding Adults and how that fits with CSCI's role. ICG has learned that there may have been issues of local authorities being a little over exuberant with their powers in this regard in the Midlands and this has led to questions again of interpretation of local/national guidelines.

We have not been immune to this. In some parts of North Yorkshire recent incidents have led to providers asking ICG for support over Safeguarding Adults—questioning the basis upon which it has been conducted.

This is of obvious concern to providers and ICG is looking into it. We will be raising the issue with the North Yorkshire and York Safeguarding Adults Partnership Board, CSCI and ADASS. However, for the record let there be no doubt where the ICG stands. Adult abuse is a very serious issue. Clear categories of abuse have been laid down and **wherever it is suspected that a vulnerable adult is at risk then a full and immediate investigation must be conducted.**

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Fee negotiations for 2008-2009

ICG is about to begin fee negotiations on behalf of the care sector with North Yorkshire County Council and City of York Council. We will be setting out the increased costs providers have had to meet this year including the rise in the minimum wage and greater holiday entitlement which has put up costs by around 4%. Added to this is the increased cost of gas and electricity and the spiralling costs of fuel which has hit home care providers. If you wish to contribute your views on this please contact Keren Wilson at ICG on **01423 816 582** or e-mail keren.wilson@indcaregroup.plus.com

The Government agenda for changing the face of care

'The current system of social care delivery will need to fundamentally re-engineer and modernise to respond to pressures on the system' *Govt letter to LAs.*

Personal budgets for everyone

With the publication in December of *Putting People First* the Government signalled its intention to press ahead with personal budgets for **all adults** eligible for publicly funded social care support, other than in circumstances where people require emergency access to provision.

It will mean individuals who receive funded social care will in future be tested to assess their health and personal needs and local councils will then pay money directly into their bank accounts or that of a relative, allowing them to choose the support services they want. This will transform the way that care is commissioned by local authorities and the Government is likely to set targets on individual budgets for local authorities to meet.

Risk

Secretary of State Alan Johnson says 'As we move towards personal budgets for all, there will be cultural and regulatory barriers that we will have to tackle. There will be ongoing debates about minimum levels of protection for vulnerable people and safeguarding public money. The right to self-determination will inevitably sometimes mean being allowed to make poor or unconventional choices.'

Green Paper on social care

He promised a fundamental review of the Adult Care Funding system with an extensive Public Consultation followed by the publication of a Green Paper in 2008.

Money paid to families

Later this year an announcement on A New Deal for Carers is expected. Consideration is being given to public funding being paid to families to give care to their loved ones in the place of formal care.

Health Minister Ivan Lewis says: 'At the moment, the assumption is that people will be cared for by staff from an agency. Why can't the elderly choose to spend that money on a family member, if that is what they want? This is a way that the state can really strengthen the notion of family. When you are talking about intimate or sensitive care, for example those with dementia, people may prefer that from a relative.'



Minister for Care Services
Ivan Lewis

Self Directed Support being piloted by NYCC

NYCC is piloting 'Self Directed Support and Individual Budgets' in Hambleton and Richmondshire.

This pilot will be targeted at all adults and will be based on a new system of self assessment. During the pilot people who are eligible for publicly funded social care will be helped to complete a self assessment form. This will be entered into a new Resource Allocation System which will identify how much money they are entitled to—this will be their personal or **Individual Budget**.

In the pilot the money will come from the social services budget but in future it is hoped that money from Supporting People, the Independent Living Fund and Integrated Equipment Stores can be drawn on.

Self Directed Support is described as putting people at the centre of the process.

What is an Individual Budget?

An Individual Budget is an amount of money that is made available for someone to meet their social care needs.

The important thing with self directed support is that people will know very early on how much they may be entitled to. They will then have the chance to design their own support.

People can use the money to: pay for services the Council provides; pay for services other people provide; or develop their own service.

The NYCC pilot is being run by Mark Humble. He can be contacted on 01609 533 153.

Across the country 13 pilots have been running using different approaches on Individual Budgets for the past 2 years. These pilots are being evaluated.

One early finding was that:

'Early support plans seem to focus on personal assistance, but already were being extended to include transport, small pieces of equipment and the 'little things' important to individuals' self-esteem and social inclusion – such as visits to the hair-dresser.

For full details of all the early findings go to: <http://individualbudgets.csip.org.uk/index.jsp>

The full evaluation for the 13 pilots is due in April.



CRB Checking

We provide Standard and Enhanced CRB checks as a Registered Umbrella Organisation for the Criminal Records Bureau.

We offer:

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For more information please call **Teresa Dobson** on **01723 343 440**

I would be happy to help. You can e-mail me at: t.dobson@stcecilias.co.uk

ICG local meetings held on training issues

ICG meetings for care providers have been held around York and North Yorkshire looking at issues about training. At the Harrogate meeting Sandra Sweeney, Senior Pharmacist Medicines Management at North Yorkshire and York PCT spoke about the new guidance on *The Handling of Medicines in Social Care*



Sandra Sweeney, PCT Pharmacist

published by the Royal Pharmaceutical Society in November.

Meetings at York, Skipton, Harrogate, Leeming and Scarborough were attended by Skills for Care—giving advice on how to pick a training provider and how to use the Skills for Care Knowledge Sets as a benchmark when buying training. Several training providers attended each meeting to promote training options and answer questions.

Skills for Care Knowledge Sets are available from: <http://www.skillsforcare.org.uk/view.asp?id=701>

Planning for a Flu Pandemic in social care

A pandemic (worldwide epidemic) of influenza remains a very real threat. Health experts, including the World Health Organization (WHO), have warned that a pandemic is inevitable. A severe form of avian influenza or 'bird flu' – called H5N1 – has affected poultry flocks and other birds in several countries since 2003. If this were to mix with human flu viruses it could create a new virus against which no-one would have immunity.

Planning for this has been going on across the country and ICG has been warning people to familiarise themselves with the issue and to put in place business continuity plans. Now a new operational and strategic framework has been published for social care. Aimed at all care providers, it includes planning tips and checklists.

An operational and strategic framework—planning for pandemic influenza in social care is available from:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080755

An update from Skills for Care

National Minimum Data Set for Social Care goes Online

New and existing employers can now log on to the secure NMDS-SC website (www.nmds-sc-online.org.uk) and enter their establishment and worker details. The benefits for employers are easier, faster completion and updating of records, a high level of security to protect employer and worker information, 'On screen' help and guidance, the ability to build your workforce information at a time and pace which suits you and instant standard reports that enable you to compare your business with other employers locally, regionally and nationally.



Computer Explorer Buses to help with NMDS

Over a thousand employers have completed the data set in Yorkshire and the Humber. A regional brochure is available with the findings, please download this from our website www.skillsforcare-yh.org.uk or contact Sarah Buglass on Tel: 01904 461 050 or E-mail: yorkshireandhumbermail@skillsforcare.org.uk.

Skills for Care is working in partnership with Age Concern Training to enable employers across Yorkshire and the Humber to be able to access a Computer Explorer Bus for training and support in using the online system. The buses packed with state of the art IT equipment will help employers get started on NMDS-SC or just add new data to their establishment's profile. The buses are planned for the York and North Yorkshire Sub-Region on the 26 February 2008, please check our website for further details. ICG members will be informed by e-mail.

Launch of the New Types of Worker Fund

As part of its New Types of Working initiative Skills for Care initially financed 28 national pilot schemes and are now forging ahead with the set up of a New Types of Worker Fund. Employers wishing to launch small-scale New Types of Working initiatives will get a helping hand if they meet the criteria, and can show that the development of new adult social care roles will further enhance the service that is provided. Skills for Care is inviting employers in the private and voluntary sectors to make an application. For further information on the New Types of Worker Fund and to download the application form please refer to our website.



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NYCC Strategic Commissioning events

North Yorkshire County Council has been continuing to hold events around the County to publicise its 15 year strategy for commissioning. The events have been aimed at the voluntary sector, the independent sector and older people, and have been arranged at Bedale, Scarborough, Pickering, Selby, Skipton and Harrogate.

A key message has been that future services will be aimed at keeping people independent in their own homes for as long as possible. Mike Padgham, Chair of ICG and Keren Wilson, Development Director, have been invited to present the independent care sector perspective.

Unfortunately, the events have not been attended by as many care providers as had been hoped. ICG will be asking NYCC to hold events specifically aimed at care providers and to address the issue of what services are likely to be needed in the future and how providers can work with the Council to make sure that these are in place.

ICG was among those invited by City of York Council to a consultative event on its future Strategy.



Mike Padgham addresses NYCC meeting at Scarborough



Keren Wilson addresses NYCC meeting at Pickering

Mike Padgham ICG Chair writes—Into 2008 with a bang!

CSCI on The State of Social Care

I write this as the CSCI report on *The State of Social Care in England 2006-2007* has just been published. It was interesting to see that the Commission highlighted the issue of **eligibility criteria** and how this led to differences across the country on how much care people could expect to receive. ICG has long campaigned for a fairer system and will continue to do so. I congratulate the Commission for bringing this matter to government's attention. What was disappointing in the report though was that in my opinion it missed some of the important issues for those who supply care services. **Providers are caught in a vice-like grip of rising costs and downward pressure on prices paid by local authorities, which is leading to unsustainable levels of staff turnover across the sector.**

Local authorities and government must recognise the true of costs of providing care. No sooner had 2008 dawned than social care was once more hitting the headlines. Prime Minister Gordon Brown came out fighting and in some of his strongest speeches as PM so far, his target was reform of the NHS and healthcare. Hot on the heels of that, Mr Brown was quite rightly praising the work of our carers, describing them as 'an immense force' and pledging better recognition. He needed to. Just days earlier, morale in social care had received a body blow when a major report slammed the quality of social care in this country as 'not fit for purpose'.

Time for a Change Report

A Caring Choices initiative consulted more than 700 people who receive or deliver care and was carried out by 15 organisations including the Joseph Rowntree Foundation, the Kings Fund, Help the Aged and Age Concern.

The resulting report called *Time for a Change* calls for a new system to pay for long-term care of older people after concluding that the current system is 'unclear, unfair and not fit for purpose.' It told us what we already know, that the funding of care in this country far too often comes down to which local authority area a resident lives in and what level of support they are able to fund. That cannot be the way for a caring society to treat some of its most vulnerable citizens. The Prime Minister is very clearly making the NHS a priority and maybe starting to recognise that carers play a vital role in looking after some of the country's most vulnerable people. But if this is truly to be the year of the care debate, then **the whole question of how care is funded has to be addressed.**

Early signs are good but we must keep up the pressure and take advantage of this most fickle of friends, the political spotlight. As we all know, that spotlight can all too soon alight upon a new topic, leaving care short-changed and unloved again in the darkness.

NYCC Strategic Commissioning

Finally, ICG has been round the County recently with North Yorkshire County Council talking to people about its Commissioning Strategy for the next 15 years. These meetings have been well attended by all...*apart from private sector providers that is...*mostly, they have been conspicuous by their absence. **My message to the sector is to find out what is happening** out there as there are some fundamental changes on the horizon. There is still time but we all need to think imaginatively more than ever. The status quo is no longer an option.

Mike Padgham

NHS Continuing Health Care—how is it working?

From 1st October 2007 a new National Framework for NHS Continuing Healthcare was introduced with a new process for determining eligibility designed to reduce inconsistencies. **NHS Continuing Healthcare is fully funded by the NHS.**

Clients with complex healthcare needs should qualify for Continuing Care. Where a client is in a nursing home the NHS should fund the home to cover the significant extra nursing needs.

So how is it working?

There are mixed messages from nursing homes across our area. In some parts the view is that it is working well and the new system is an improvement. In others, that it has made little difference and it is still extremely difficult to get very sick clients onto Continuing Care. Some homes even report they have given up trying.

Dying is not the criteria

The determination of eligibility for

NHS Continuing Care does not depend upon whether the client is dying but upon the complexity of their healthcare needs and the extent of their nursing needs.

Covering the costs

Some nursing homes report that the difference in fee paid does not cover the high cost of the extra nursing needs.

Note: the funding paid to care homes for clients who qualify for NHS Continuing Healthcare varies and should be negotiated.

A number of ICG members report that it is easier for a person under the age of 65 to get Continuing Care than an older person. Fees for people under 65 are generally paid at a higher rate.

In general

For many care home managers,

providing a high level of care, the increased paperwork and the constant pressure on budgets is a continual burden.

Getting Continuing Healthcare funding

NHS Continuing Care funding is determined by the PCT. Where assessments are undertaken for a client that is a resident, the Matron or senior nurse at the nursing home needs to assist with this process—making sure that all the factors of the case are identified and taken into account.

Nursing homes in 2008

Nursing homes report that these days the publicly funded clients that are sent to them from either hospital or their own homes are extremely frail. They often need pressure mattresses and hoists. In some homes up to 50% of these residents need hand feeding. This means that meal times have to be staggered to accommodate the amount of time needed and the staff on duty.



Your letters ...



Dear ICG

Selling a home care business

The decision to sell your care business is a big one and the process, once embarked upon, can be very stressful. I recently sold my home care business and thought that it might be helpful if I offered some tips.

1. Letters through the post offering you promises of big money: Do not be taken in by these. They lead you to believe that your business will be sold in a few weeks. My experience is that they promise you buyers and ask to see your accounts but this leads only to disappointment.
2. Timeframe: from the beginning the time it took to sell my business was around 2 years
3. Professional services: you need a good accountant and a good specialist commercial lawyer and this will be costly.
4. Things to consider: engaging a business advice agency; engaging a business sales company
If you engage a business sales company, as I did, remember they want an 'up front' payment (you won't get this back) and they will want a percentage of all money paid. However, they have experience, should be able to give you plenty of support, and may be able to help you to secure a buyer.
5. Time required: you are likely to have to attend a lot of long meetings
6. Be prepared for disappointment: buyers can often put things on hold and deals can fall through, there are likely to be a fair mixture of highs and lows
7. Scheduling: if you are going to need your accountants to do work for you try to give them notice. Discuss 'due diligence' dates well in advance
8. Prepare for the legal process of 'due diligence': photocopy all your contracts with suppliers, local authorities, clients. Have to hand figures, such as percentages of care hours for each month over the last twelve months. Write a report on how your invoicing system works and who is responsible for it. Have all staff details, hours worked and holiday entitlement ready.
9. Be aware that the buyers of your business—the business you have nurtured—are likely to want to change many things. This is especially true of a large company which will have established ways of doing things that could be very different from yours. This is likely to be painful for you and it may be better for you to cut all links to your former business.

If you do decide to sell—I wish you all good luck

Erica Johnson

Dear ICG

Hospital Discharges

I am writing to inform you that we have had a few instances now from both hospitals we deal closely with. These being the Friarage Hospital and York District Hospital where residents from my home have been for either appointments or being admitted to the hospital either through the GP or emergency.

Some of my residents have been arriving back from hospital very late on in the evening, 10pm or 11pm, and in some instances in the middle of the night. Some waiting for an ambulance in a hallway with no food or drink from tea-time.

All the people I am looking after are frail and elderly, the government is hitting hard and highlighting abuse cases in care homes but personally I think this is the height of abuse.

A very concerned and worried care Home Manager (name and address supplied)

Dear ICG



Having recently attended a very informative course run in York regarding the much publicised 'Flu Pandemic' we were shocked to hear that it is not a question of 'if' but 'when!' We were given the impression that it was expected anytime within the next 18 months. This prompted us to act sooner rather than later. It is far better to be prepared and informed. Our staff and residents are now fully briefed and plans in place to reorganise ourselves during what is sure to be a very trying time for individuals and businesses alike.

Thank you for keeping us informed about the Flu Pandemic planning and for telling us about this course.

Ann Sails
Larchfield Manor

News in brief



Mike Padgham, UKHCA Chair, back centre, Secretary of State for Health Alan Johnson, centre, and Care Services Minister Ivan Lewis standing second left.

Chair of UKHCA

Mike Padgham, ICG Chair, has been re-elected as Chair of the leading national association for home care providers—the United Kingdom Home Care Association.

He will now be the UKHCA Chair for the next 3 years. Mike says 'The fight to get Government and local authorities to begin paying a fair price for care will be central to my and UKHCA's work in the coming year.'

Mike is the Managing Director of Carewatch (North and East Yorkshire). He also owns a care home in Scarborough and is a Board member of the English Community Care Association (ECCA).

In top 50

We are very pleased to report that our Chair, Mike Padgham, has been ranked at number 43 in a New Year listing of the most important people in social care. *This Caring Business* has published 'Power 50—a list of people who have their fingers on the pulse of the sector.'

Representing your interests

Keren Wilson, ICG's Development Director, was voted Chair of the York and North Yorkshire Sub-Region for **Skills for Care** recently, and also becomes a member of the Yorkshire Regional Committee.

Keren says 'I am pleased to represent care providers across our area. I feel strongly that the key to good personalised care services is being able to recruit the right people, and then to give them help and encouragement and appropriate high quality training so that they are both skilled and motivated – managers and staff.'

'I will use this opportunity to help Skills for Care support care providers in developing staff – because in the care sector they are our greatest asset. I know that a key element is cost and this a message I take with me into discussions.'



Keren Wilson

ICG Care Awards 2008

An ICG Care Awards event to recognise excellence is now planned for the autumn. We want to take longer to plan in order to make sure that the event does justice to our high expectations.



The voice of independent care providers in York and N Yorkshire

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ICG is a care association which represents independent care providers in York & North Yorkshire including care home providers for all client groups, domiciliary care agencies, supported living and extra care housing providers, and day centres in the private and voluntary parts of the independent sector.

Independent Care Matters is sent currently to all care providers in York and North Yorkshire; all City Councillors; all County Councillors; Borough and District Councils & NHS Trusts; to all local MPs and MEPs and to senior managers at North Yorkshire County Council, City of York Council and the North Yorkshire and York Primary Care Trust (PCT).

Safeguarding Adults—continued

Allegations of abuse or straightforward complaints?

ICG is a member of the North Yorkshire and York Safeguarding Adults Partnership Board and has contributed these comments to the recent consultation on the North Yorkshire and York protection procedures.

1. Working with the care provider

If investigations are carried out without telling the care provider what is being investigated this brings about a climate of fear and apprehension which ICG believes is counter-productive to good investigative practice. Except where there is suspicion that the manager of a care service is the perpetrator of abuse, they should be involved in the process as a stakeholder. If investigations are conducted without giving the care provider any information it will have the effect of **detering** people, whether managers or staff, from reporting abuse.

2. Proportionate action

We do not believe that a full scale adult abuse investigation should take place in order to identify issues of poor practice – for example regarding general satisfaction over meals or drinks. These should be dealt with but in a different way. We also believe that to confuse these issues with abuse is to **devalue** the very serious nature of abuse. They should be looked into but in another context.

Safeguarding Adults – what is Abuse?

No Secrets defines adult abuse as:

‘a violation of an individual’s human and civil rights by other person or persons. Abuse may consist of single or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into

a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship or may result in significant harm, or exploitation of, the person subjected to it’.

ICG believes that vulnerable adults should be given the greatest possible protection from harm.

ICG believes that where complaints are made about a care service then these should be addressed in the first instance through the existing channels – this could be to the registered home manager, or to CSCI.

Safeguarding Adults investigations—what it means

Safeguarding adults investigations are very serious matters. Providers should know that when an investigation is carried out, letters are dispatched to all GPs, all local authorities which have contracted clients, and to all clients’ relatives telling them that an investigation is taking place. All local authority placements are suspended for the duration – and there may be no time-frame set on this. All clients and their relatives are then interviewed. Interviewers ask questions about all aspects of daily life.

If it turns out that no abuse has been taking place then untold damage has been done to staff morale and the reputation of the provider.

ICG supports the investigation of abuse whole-heartedly. It will, however, be asking the authorities to put in place checks and balances to ensure that investigations are conducted properly.

If you have any concerns over these matters please get in touch, in confidence, with ICG – details above.